



**UTILITY DECLARATION
AND POWER OF ATTORNEY**
Utility Applicati n

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Lyon & Lyon LLP
Docket Information
271/287

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AUG 02 2002

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

TECH CENTER 1600/2900

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **Immunological Test Kit with Immunologically Invisible Carrier** the specification of which

(Check One)

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is attached hereto OR
was filed on October 17, 2001 as United States Application Serial No. 09/982,265 or PCT International Application No. _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Date of Filing | Priority Claimed | |
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| | | | Yes | No |
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I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date |
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| U.S. Parent Application Number | PCT Parent Number | Parent Filing Date | Status-Patented, Pending or Abandoned |
|-----------------------------------|-------------------|--------------------|---|
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POWER OF ATTORNEY: As a named inventor, I hereby revoke all previous powers of attorney and appoint as my attorneys and/or agents, with full power of substitution and revocation, to prosecute this application and transact all business in the United States Patent and Trademark Office, and in countries other than the United States, and to do all things necessary or appropriate therefor before any competent International Authorities in connection with any international patent application(s) corresponding to the above-identified invention application, all of the registered practitioners identified by Customer Number 22249:



22249

PATENT TRADEMARK OFFICE

LYON & LYON LLP
Suite 4700
633 W. Fifth Street
Los Angeles, CA 90071
(914) 681-8851

Please direct all inquiries to Charles M. Doyle, Esq., at the above Customer Number.

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| 201 | FULL NAME OF INVENTOR | FIRST Name Bo | MIDDLE Initial | LAST Name Qiu | |
| | RESIDENCE & CITIZENSHIP | City East Brunswick | State or Foreign Country NJ | Country of Citizenship Peoples Republic of China | |
| | POST OFFICE ADDRESS | Residence Address 7 Lake Ave. | City East Brunswick | State or Country NJ | Zip Code 08816 |
| INVENTOR'S SIGNATURE <u>Bo Qiu</u> DATE <u>2/25/02</u> | | | | | |

| | | | | | |
|--|-------------------------|---|--------------------------------|---|-------------------|
| 202 | FULL NAME OF INVENTOR | FIRST Name Guobao | MIDDLE Initial | LAST Name Zhang | |
| | RESIDENCE & CITIZENSHIP | City Piscataway | State or Foreign Country NJ | Country of Citizenship Peoples Republic of China | |
| | POST OFFICE ADDRESS | Residence Address 900 Davidson Rd., Apt. 108 | City Piscataway | State or Country NJ | Zip Code 08854 |
| INVENTOR'S SIGNATURE <u>Guobao Zhang</u> DATE <u>2/25/02</u> | | | | | |

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|---|-------------------------|------------------------------------|--------------------------------|-------------------------------|-------------------|
| 203 | FULL NAME OF INVENTOR | FIRST Name Stanley | MIDDLE Initial | LAST Name Stein | |
| | RESIDENCE & CITIZENSHIP | City East Brunswick | State or Foreign Country NJ | Country of Citizenship USA | |
| | POST OFFICE ADDRESS | Residence Address 6 Rowan Court | City East Brunswick | State or Country NJ | Zip Code 08816 |
| INVENTOR'S SIGNATURE <u>Stanley Stein</u> DATE <u>2/25/02</u> | | | | | |

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| 204 | FULL NAME OF INVENTOR | FIRST Name Leonard | MIDDLE Initial | LAST Name Sigal | |
| | RESIDENCE & CITIZENSHIP | City Plainfield | State or Foreign Country NJ | Country of Citizenship USA | |
| | POST OFFICE ADDRESS | Residence Address 609 Belvidere Ave. | City Plainfield | State or Country NJ | Zip Code 07062 |
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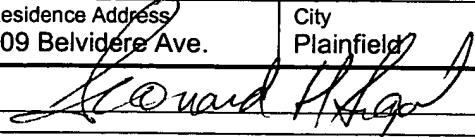
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| INVENTOR'S SIGNATURE <u>Michael Brunner</u> | | | | DATE <u>2/22/02</u> | |

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